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ABSTRACT

The study described in this report was conducted to investigate cultural differences in attitudes toward the handicapped and their presence in postsecondary institutions in Hawaii among faculty with Eastern and Western cultural backgrounds. Chapter I discusses the background and significance of the study, citing the multi-cultural make-up of Hawaii, reactions among community college faculty to recent educational accessibility laws, and information about cultural attitude barriers toward the handicapped that were revealed through U.S. involvement in the Vietnam War and the White House Conference on Handicapped Individuals. This chapter also outlines research questions, defines terms, and states the study's assumptions and limitations. Following a review of related literature given in chapter II, chapter III discusses the procedures and methods of the study which involved an examination of historical, sociological, and psychological research on attitudinal differences between Westerners and Easterners toward illness, disabilities, and handicaps; and a survey of Leeward and Kapiolani Community College faculty concerning handicapping conditions and the treatment of the handicapped. Chapter IV presents results indicating that historically and culturally, Easterners and Westerners did perceive and treat disabled persons differently; that some of these perceptions were evident among faculty members; and that both cultures exhibited a tendency to isolate the disabled population. Finally, chapter V offers interpretations, conclusions, observations, and recommendations. The questionnaire and a bibliography are appended. (HB)

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East/West Attitudes Toward The Handicapped and Their Presence in Postsecondary Education in Hawaii

Kirk W. MacGugan

A MAJOR APPLIED RESEARCH PROJECT
PRESENTED TO NOVA UNIVERSITY IN PARTIAL FULFILLMENT
OF THE REQUIREMENTS FOR THE DEGREE OF DOCTOR OF EDUCATION

NOVA UNIVERSITY

1980

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Abstract of a Major Applied Research Project Proposal Presented to Nova University in Partial Fulfillment of the Requirements for the Degree of Doctor of Education

EAST/WEST ATTITUDES TOWARD THE HANDICAPPED AND THEIR PRESENCE IN POSTSECONDARY EDUCATION IN HAWAII

by

Kirk W. MacGugan

1980

With the passage of the 1973 Rehabilitation Act and the subsequent growth of equal educational accessibility laws for the handicapped, the community colleges in Hawaii faced a serious problem of accommodation of which, for the most part, they were not aware. Simply stated, the problem was the equal accommodation of handicapped students in a multi-cultural setting where attitudes toward disabilities reflected cultural bias and where actions therefore, were less than effective.

One of the purposes of this Major Applied Research Project was to research the historical, sociological, and psychological background of the multicultural problem given the Eastern and Western cultures which made up Hawaii's population. An additional purpose of this study was to present recent evidence of a possible East/West attitudinal dichotomy towards handicaps, illnesses, and disabilities. This evidence was drawn from two of Hawaii's community colleges.

Materials on the cultural background of Hawaii's populations

were available at the University of Hawaii and the University's East/West Center. More specific evidence of this problem was provided through the creation and utilization of a questionnaire which was given to the entire faculty at Kapiolani Community College and Leeward Community College. The questionnaire provided evidence of the persistence of cultural attitudinal differences. These attitudinal differences were related to a set of research questions delineating Eastern and Western perceptions and beliefs about handicapping conditions. Some of the statements in the questionnaire were drawn from these research questions and others from the handicapped legislation related to equal educational accessibility.

At Leeward Community College (LCC) in Pearl City, Hawaii, where the investigator was Handicapped Officer, there were several attempts being made to educate and sensitize the faculty about their attitudes toward the equal educational accessibility laws, and, their attitudes toward their present and future handicapped students. The job of Handicapped Officer was to work with the faculty in imagining positive ways in which handicapped students could be accommodated. Faculty were fearful of the laws and primarily imagined negative future scenarios. Any information which aided in this sensitivity project would be helpful for the Handicapped Officer and the LCC faculty. Specifically, knowledge that this study was being conducted was shared with the Provosts of Kapiolani and Leeward Community Colleges. The Deans of Community and Educational Services on these campuses were also informed. Primarily, the information gained from this study was circulated through the state

of Hawaii's postsecondary system - the community colleges - through a letter describing the problem and the purposes of the study. All community college Provosts were contacted and a sharing of this material was suggested for use in sensitivity training of faculty on all community college campuses in Hawaii.

The data collected for this study was treated in two ways: the historical/cultural data was aligned with a perceived East/West attitudinal dichotomy toward the disabled put together from initial research done on geographic and religious differences between Easterners and Westerners; the research questions were drawn from this information and from the dominant Western perceptions in the handicapped legislation. The questionnaire attempted to reflect all of this research, and the data collected from the community colleges was applied concept by concept to the differences between the East and the West and question by question to issues in the law.

The results of the data collected was inconclusive when applied to Hawaii's multi-cultural population. Historically and culturally, Easterners and Westerners did perceive and treat disabled individuals differently. The data did reveal a holdover in Hawaii's community colleges of some of these perceptions but not all of them. The Easterner has remained more internalized and family oriented and this has had a particular effect on their disabled. The Westerner has remained more externalized and institutionally oriented and this has had a different effect on their disabled. The most disturbing result of the data collected from the questionnaire was the ambivalence expressed over segregated

(special) or integrated education for the handicapped. Despite differences in attitude, both Easterners and Westerners have tended to isolate their disabled population.

Since the results were inconclusive, neither completely supporting or refuting the research questions, it was recommended that further study be done using the historical/cultural information collected here as a guide. This study only raised more questions, which was valuable. It was also recommended that the investigator pursue the use of this study in consciousness raising efforts amongst Hawaii's teachers to improve the conditions under which handicapped individuals are educated in Hawaii's public schools. It was also recommended that this study be made available to the handicapped through the State Commission on the Handicapped.

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CHAPTER I

INTRODUCTION

Background and Significance

At Leeward Community College (LCC) in Pearl City, Hawaii, the majority student population was Japanese. Caucasians made up a good portion of the faculty although not the majority. The counselling staff represented a racial diversity including those with Hawaiian and Filipino backgrounds. Hawaii is a multi-cultural state and the faculty and student makeup at LCC reflected this predominant inter-racial characteristic. Hawaii is one place in the world where cultures and races from the East and the West converge and live together fairly harmoniously. East refers to representative cultures from Asia and the Pacific. West refers to representative cultures from the Americas, Europe, and Africa.

The advantage of a cross-cultural community are the expansion of information and experience which can be shared by individuals. The disadvantages are the lack of communication and the resultant misinformation leading to isolation, loneliness, and even segregation. This latter situation also described another portion of Hawaii's population: the handicapped.

Just as a culture's language and religious outlook is unique, so also is a culture's attitude toward handicaps, illnesses, and disabilities. Handicapped children seeking an education in a cross-cultural setting

might possibly be receiving conflicting signals about how to view and deal with their handicap when parents represented one viewpoint and teachers represented another.[1]

It was the contention of this study that LCC, along with all other schools in Hawaii, faced a problem of accommodation of its handicapped clientele. The problem was one of fulfilling the spirit and letter of the equal educational accessibility laws in the midst of cross-cultural attitude bias and barriers. Handicapped students were presented with different attitude barriers along with varying cultural signals. Parents might promote and display attitudes of shame and anxiety. A school counsellor might unknowingly reverse that attitude signal while an individual instructor reinforced the parent's attitude and, also unknowingly, became an educational depressant. Any variety of combinations was possible when one was dealing with attitudinal signals across cultural lines.

At LCC there seemed to be a quiet paranoia sweeping the faculty regarding two points about the equal educational accessibility laws for the handicapped. First, faculty generally seemed to be fearful that they would find themselves facing a handicapped problem in their classrooms for which they had no special educational training. The assumption barrier here was that the handicapped can only be taught in a special

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[1]U.S. Department of Health, Education, and Welfare, Office of Human Development, The White House Conference on Handicapped Individuals, Special Concerns State White House Conference Workbook (Washington, D.C.: U.S. Dept. of Health, Education, and Welfare, 1977), p. 82.

education setting. Secondly, faculty feared the liability aspects of Section 504 of the 1973 Rehabilitation Act which made them responsible for the safety and education of a handicapped student over a non-handicapped student. These two fears were working together to create a most uncomfortable educational situation for both teachers and their handicapped students.[2]

These fears, although valid to a certain degree, might be masks used by faculty, counsellors, and administration to cover or hide the more basic problem in the acceptance of the handicapped student into postsecondary education. This problem was the attitudinal barrier of facing, accepting, and dealing with the handicapped individual at all. Cultures come together on their almost instinctual feeling to reject the handicapped individual - a rejection usually best carried out through segregation, isolation. The initial reaction of rejection is next culturized, i.e., degrees of acceptance enter into the picture, and divergent cultural attitudes begin to take shape.[3]

Background and Significance

Two sources of information about cultural attitude barriers toward the handicapped have come to light in this decade. The United States' involvement in the Vietnamese War was one, and, the White House Conference on Handicapped Individuals which met in 1977 was the other.

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[2]Leeward Community College, Self Study For the Handicapped Section 504 (Honolulu: Leeward Community College, 1978), pp. 11-71.

[3]Howard S. Becker, The Other Side, Perspectives on Deviance (New York: The Free Press, 1964), pp. 119-137.

During, and especially toward the close of the Vietnamese War, there were shock waves which reverberated throughout the U.S. when many of the Vietnamese victims of the war were reduced to begging in the streets. In response, the American press asked very typical external/social, American/Western questions. Where was the Vietnamese Veterans Association to aid military casualties? Why didn't the Vietnamese society accept some responsibility for the human casualties of war? Why were there societal expressions in Vietnam of shame and fear toward these now handicapped individuals? Why was there no rehabilitation mechanism present and working in the Vietnamese society? The American press had some of the same problems with the Vietnamese orphans. Americans were informed that orphanages were not prevalent in the Orient. Orphaned children, who also bore the stigma of handicapped, dealt with their fate the best they could. If in their cycle of life, they found themselves alone or crippled, that was their individual problem or their family's problem - not society's. The West, on the other hand, has always displayed great faith in the use of external/social institutions.

In Hawaii, there were many months of press coverage on the orphans of this war. Many local families adopted Vietnamese children. All of this press coverage, though, began to reveal not just a local external/social Western sympathy with the plight of these handicapping circumstances, but also a local Eastern sympathy with the Eastern and more segregationist or internal (family-oriented) attitudes being expressed toward handicapping conditions. Hawaii is not just a Western state;

it is so far West that it is also East. The majority population in Hawaii is Eastern. The dominating cultural influence is Eastern. This is not to say that there are not Western cultural overlays of this dominant Eastern cultural influence, for there are. The point is that despite the fact that the present Eastern populations are a second and third generation removed from the East, they still hold to certain basic cultural attitudes that have crossed time lines and geographical boundaries and have had survival value. For the most part, Eastern cultures are steadier than Western cultures, that is, more respectful of family and history and more determined to allow minimum cultural change.[4]

An apparent East/West clash of attitudes toward individuals with handicapping conditions became obvious in arguments and discussions which began to take place at both a faculty and an administrative level at LCC. The end of the Vietnamese war and the press coverage discussed above coincided with the writing of the 1973 Rehabilitation Act, which, when implemented by the Department of Health Education and Welfare (HEW) would provide equal access or the mainstreaming of all handicapped individuals into elementary, secondary, and post-secondary schools. Handicapped individuals would be incorporated into regular classrooms with the non-handicapped, be guaranteed equal physical and program access, and be taught, as much as possible, in a least restrictive environment. As a result of the writing of these laws, teachers were

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[4]Gavan A. Daws, Lectures on Ancient and Modern History, University of Hawaii (Honolulu, Hi., 1966-67).

expected to think about alterations and modifications, not of course content, but of techniques used to convey course content. Allowances were to be made for brailled material, seeing eye dogs, signers and interpreters, wheelchairs, notetakers, tape recorders, etc. Faculty attitudes toward these legal requirements seemed to reflect cultural bias. Western faculty complained about the encroachment of the Federal Government, an external/social concern. Eastern faculty worried over the appropriateness of the legislation for a handicapped population which they believed benefitted more when isolated at home or in special schools. Both groups questioned the wisdom of working with the handicapped in an integrated setting.

In 1977, the White House Conference on Handicapped Individuals was held in Washington, D.C. This was one of the first times that there was national recognition of the handicapped as part of the American Civil Rights Movement. Several awareness papers were published by the HEW as a result of this conference. The most significant of these papers dealt with varying ethnic attitudes toward the handicapped.[5] In A nation where many cultural and ethnic attitudes rub against each other every day, the revelation of specific ethnic attitudes toward disability was an important piece of information. The knowledge of such information could be beneficial to a host of social service workers who were involved with the handicapped. Attitudes are determiners of whether one will seek medical care, of whether one will submit to institutionalization, of

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[5]H.E.W., op. cit., pp. 67-95.

whether one will socially interact with the handicapped, of whether one will value and provide equal educational access to all handicapped.

> ... it seems apparent that 'handicap' is a highly variable term meaning different things to persons within different cultures.[6]

> With respect to the concerns of this conference, the primary need for assessment of handicapping conditions, persons affected by these conditions, services available, and services needed must first start with developing cross cultural definitions of what constitutes a handicap, how persons with handicapping conditions can be located in view of some of the problems mentioned above, determining which of these conditions might eventually be preventable and an assessment of rehabilitation program needs of those for whom the condition already exists.[7]

One of the most interesting awareness papers produced by the White House Conference dealt with the unique problems of handicapped native Americans. Indian populations with extended family relationships tend to absorb a 'handicapped' or 'different' person into the existing family and social structure. There is a higher acceptance of 'deviance' among Indian groups than in contemporary American society as a whole. Within many Indian groups, the idea persists that a child has the prenatal choice of how she/he wishes to be born and, if handicapped, is so by choice. Deaf Navajos are, therefore, difficult to locate because they make excellent shepherds and are so incorporated into Navajo society.[8]

Ron Wakabashi, chairperson of the Asian Rehabilitation Services in Los Angeles, California, concluded dissimilar findings about Asian/American attitudes towards handicapping conditions. Deviance within

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[6]Ibid., p. 82. [7]Ibid., p. 88. [8]Ibid., pp. 80-87.

an Eastern family structure produces Haji (Japanese for shame), especially when the family cannot take care of this problem and has to seek outside or institutional help. Wakabashi stated that Asian/Americans have worked very hard to conform to American life, to the point of creating a quiet, cultural invisibility.

> One aspect of this effort to achieve invisibility is represented in a dominant concern within the ethnic communities to shed themselves of as many vestiges of racial, ethnic, cultural or social differences as possible. This phenomenon eventually carries over to a developed characteristic behavior that promoted the active denial of deviance within the ethnic community.[9]

These are just a few instances and examples of a broader problem which is beginning to affect what John Gliedman calls "The Wheelchair Rebellion."[10] The Vietnamese War might possibly have had an influence on the passage of the 1973 Rehabilitation Act - as disabled veterans again returned home and American consciousness was somewhat raised about past attitudes toward and past treatment of the handicapped minority. The White House Conference on Handicapped Individuals might have been the first group to identify the possibility of different cultural views toward handicapping conditions. The laws have been signed and HEW attempts to enforce them. LCC's struggles with fulfilling the law is the struggle of all American educational institutions in microcosm.

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[9]Ibid., p. 71

[10]John Gliedman, "The Wheelchair Rebellion", Psychology Today (August 1979) p. 59.

Something has gone wrong states Gliedman, who is on the research staff of the Carnegie Council on children. The promise of the legislation and this new civil rights movement are being overshadowed by the struggle. Education is at the heart of the legislation and teachers seem to be waging a war against the laws rather than working to find ways to enforce them. Gliedman describes a two-pronged problem. The handicapped are not as organized as they should be to now carry on an essentially political struggle. The reaction of the able-bodied to legislation which literally came from the top (Congress) down is influenced by cultural attitudinal consideration and dominant historical opinion toward the handicapped. "Along with ... tangible disadvantages, the disabled must also cope with a kind of paternalism from their able-bodied allies that has long been discredited in race relations."[11]

The equal educational accessibility laws are being handled by most educators as if the disabled minority were 'a society of the sick' - ill children who still require special attention instead of integrated attention and mainstreaming. The purpose of this study was to determine the existence of those diverse cultural attitudes that might be influencing the withholding of these legal services to the handicapped.

> Studies of the attitudes of able-bodied people toward the handicapped usually report what they say about the disabled, not how they act toward the. Virtually

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[11] Ibid.

> none of the research sorts out the relative roles of fear, ignorance, inexperience, or prejudice.[12]

This study concentrated on teachers and administrators in postsecondary education in Hawaii, where the faculty reflected the multicultural setting of the state. Postsecondary educational institutions operate under Section 504 of the 1973 Rehabilitation Act. Hawaii's postsecondary system consisted of seven community colleges which were part of the University of Hawaii. Because of the timing of the handicapped legislation, the community college was the first educational experience beyond high school for many handicapped individuals. Their interaction with community college faculty would be a significant determiner of their future.

This study was a significant aid in the sensitization and consciousness raising of postsecondary faculty. It was one of the first studies of its kind where cross-cultural attitudes, East/West, were investigated. It added useful information to compliance officers at the community colleges as well as faculty, administrators, counsellors, and handicapped students.

Research Questions

The most critical issue pertaining to the problem of possible East/West attitudinal differences toward handicaps, illnesses and disabilities was whether the existence of such attitudinal differences affected the accomodation of the handicapped in postsecondary education in Hawaii, and how. Related to this issue was the range of

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[12]Ibid., p. 64

attitudinal differences between Easterners and Westerners which influenced the treatment of the handicapped in four major life areas: family, society, education, and employment. The nature of this problem was first, historical. If such attitudes existed, they did so for reasons which were historical and cultural in nature, and their historical and cultural bases needed to be explored. It was not just the historical existence of these attitudes which needed to be determined, though, but the cultural persistence of these attitudes and their effect on a serious present issue: the mainstreaming of the handicapped into an integrated educational setting.

Attitudes existed and influenced one's life setting for other reasons. These reasons were usually related to one's religious and economic circumstances. Religious and geographic backgrounds of Easterners and Westerners also had to be explored to determine their influence on these attitudes. Even though historical background for attitudinal differences could be found, present instances of the holdover of these attitudes would also have to be found. This was not too difficult given the predominance of the segregation of the handicapped in both the East and the West. The preference for segregation and isolation of the handicapped was the second major issue related to this problem. Despite attitudinal differences, the problems of the handicapped have been resolved in a seemingly similar fashion: isolation within the family in the East, or, within an institution in the West.

To determine the existence of this problem, it was necessary to

explore cultural differences in relation to handicapping conditions by comparing specific cultural attitudes from the East and West. It was necessary to attempt to relate these differences to the present multi-cultural setting in Hawaii. Emphasis had to be placed on: (1) locus of care for the handicapped in different cultural settings: the family or society; (2) the use and purpose of education for the handicapped given different cultural settings - whether the future of one who was handicapped was seen from the standpoint of dependence or independence; and (3) how employable the handicapped individual was seen within her or his specific cultural setting.

Education was seen as the key in the determination of the exploration of this problem because attitudes toward the education of the handicapped determined whether one who was handicapped could break away from dominant cultural attitudes and progress beyond them. For the purpose of this study, it was theorized that, at present, the handicapped are finding it difficult to break out of the bonds of their handicapping conditions because their educational experiences are fraught with the same attitudinal biases and barriers that are identified in the equal educational accessibility laws. The attitude and practice of segregation of the handicapped was still a possible problem for the handicapped because in post-secondary education, in Hawaii at least, the integration of the handicapped was being resisted by teachers of both Eastern and Western cultural backgrounds.

The following research questions were pursued as regards attitudinal differences toward the handicapped given an Eastern and

Western multi-cultural setting:

1. Was there any difference in Eastern and Western attitudes toward handicaps, illnesses, and disabilities?

2. Did Easterners and Westerners perceive that a handicap was a family responsibility or a social responsibility?

3. Did Easterners and Westerners believe that segregated or integrated social and educational settings were best for a handicapped individual?

4. Did Easterners and Westerners perceive dependence or independence for the handicapped?

5. Did Easterners and Westerners perceive partial or full employment for the handicapped?

6. Did Easterners and Westerners feel family shame and guilt relative to a handicapped member of the family?

7. Did Easterners and Westerners take advantage of medical and rehabilitation facilities for their handicapped?

8. Did Easterners and Westerners perceive handicaps as an individual and family burden?

9. Did Easterners and Westerners view handicapped individuals benefitting from a maximum or minimum segregated education?

10. Did Eastern and Western families absorb-for-life their handicapped members?

11. Did Eastern and Western families tend to direct their handicapped members into society?

12. Did Easterners and Westerners believe that the individual is responsible for oneself and should be worked with by special care units in society?

13. Did attitude differences (East and West) present problems for handicapped students in Hawaii's Community Colleges?

Definition of Terms

The following are definitions of terms used in this study:

1973 Rehabilitation Act - the enabling law requiring the Department

of Health, Education, and Welfare to begin the equal educational accessibility laws for the handicapped; this enabling legislation, in particular, contained in Section 504 requirements for integrating or mainstreaming the handicapped in post-secondary educational institutions.

Department of Health, Education, and Welfare - the government agency responsible for the implementation of the equal educational accessibility laws; this responsibility will be replaced by the new Department of Education.

Handicapped Officer - compliance officer in postsecondary education responsible for physical and program access of the campus for the handicapped.

East/West Center, University of Hawaii - begun by President Lyndon Johnson; a multi-cultural housing and educational facility for East/West students at the crossroads of the Pacific.

Eastern/Western - a geographic and philosophical designation in World History to differentiate those parts of the world with either a Hindu, Buddhist, Confucian, Taoist religious background, or, a Hebrew, Moslem, or Christian religious background.

Likert's Summated Rating Scale - a method of determining one's attitude toward a given object; the respondent may choose from strongly agree to undecided or strongly disagree; the items are numbered from 5 to 1 with 5/4 for the positive statements and 2/1 for negative statements; the idea is that the higher one scores, the more favorable is one's attitude toward the object.

Handicapped Liberation - the latest civil rights issue in the United States, equality of education and employment for disabled citizens, equal access for all.

Karma - the Hindu belief that the soul migrates over a long period through many bodies and many lifetimes.

Cyclical Time - repeated earthly lifetimes.

Linear Time - one earthly lifetime.

Paraplegic - paralysis of two limbs.

Quadraplegic - paralysis of four limbs.

Developmental Disability - motor function disability due to brain damage.

Assumptions and Limitations

The condition which created the greatest limitation of this study was a historical one. The fact that the local Eastern population was as much as three generations removed from original cultural traditions weakened the findings of this study relevant to the questionnaire. The fusion of Hawaiian, Western, and Eastern cultures in Hawaii has created a local syndrome where local responses to political and educational problems reveal a special energy level at work adapting to the American way. This study would have been more precise and its problem easier to define if Hawaii were either an Eastern or Western country, rather than a Western state with a majority Eastern population. Westerners in Hawaii have also been affected by this local syndrome. This was literally an integrated society in terms of people's relationships with each other. The homogeneity of the state represented a limitation to this study which sought to classify attitude by general population.

Sociology textbooks revealed that first-generation Asian-Americans retained most old country traditional values including language. Second-generation Asian-Americans let certain traditional values slide as they became more American, and by the third generation, even the language had been lost because the younger generation rejected the older generation. The theory behind this study questioned the appropriateness of this analysis. However, some of this analysis probably was in operation and, if so, also represented a limitation of this study. The Community College System in Hawaii was only ten

years old. Most of the faculty were tenured by now and, if Asian-American, were most likely to be second generation.

The local Western population was also removed from 'mainland American ways'. Attitudes from both these cultural groups have influenced one another. Americans, along with most Westerners, seem to be a people whose morality has to be legislated. The handicapped legislation was the latest in a series of historical legislative mandates requiring Americans to give equal educational and employment treatment to disenfranchised minority groups - the Blacks, Women, the Handicapped. The theoretical problem presented in this study was that Westerners, also, held attitudinal conflicts in relation to legislation which they created. Since many handicapped organizations worked and lobbied to produce and pass the equal educational accessibility laws, those who are non-handicapped may not be able to identify with the specific abuses which the law defines. However, Americans also have the capability of adjusting to civil rights legislation with time. It was believed that an adequate amount of time had not yet passed in relation to the handicapped laws for that adjustment. For a Westerner, though, living in integrated Hawaii, that adjustment may have occurred and may also have been a limitation of this study.

This study was made by the Handicapped Officer at Leeward Community College, who was a Compliance Officer, responsible for seeing that the handicapped laws were being carried out as smoothly as possible. The Handicapped Officer had contact with other campuses and with community agencies which provided service for the handicapped. A

consistent message seemed to be coming from that contact: that faculty attitude and apprehension in postsecondary educational institutions was creating a problem for the accommodation of the handicapped. However, even though this seemed to be a major message about the fulfillment of the law, the range of the problem might have been narrower than originally suspected. The primary focus of contact for this study was LCC. This might also have been a limitation of the study. The use of the questionnaire on only two campuses limited the external validity of this study or its generalizability. The community colleges in Hawaii were diversely organized. This diversity could effect or limit the ability of this study to generalize to all the campuses based on data collected on one or two.

A proposal often discussed by community college administrators in Hawaii was the postsecondary localization of services for the handicapped. In other words, one community college campus would specialize in access for the deaf, another in access for the blind, another in access for the mobility impaired, etc. Even though this might seem like an economically efficient idea on the surface, it was a violation of the law in its reemphasis on segregation - separate but equal services. A community college system could, quite inexpensively, achieve a full service level for the handicapped in this way. There were also moves on several campuses to designate those teachers who worked best with the handicapped. Why worry a student with a teacher who was uncomfortable with handicapped people? It was recognized that these two examples represented subtle discriminatory

attitudes. Not everyone will agree about discrimination because it is subtle. The idea was that if someone was trying to help, how could this prejudice the client? The greatest limitation of this study was the involved working of attitudinal influence. Attitudes and their influence are as elusive as prejudicial practices performed for the good of the individual. These attitudes would be quite difficult to identify and see in operation.

This study was limited by the populations being discussed. There was some attempt to historically identify the attitudes of some of Hawaii's populations - Japanese, Chinese, etc. The main thrust of the study, though, was to try to provide evidence for an attitudinal duality, East and West, which also represented both a geographic and historic duality. This tendency to generalize Eastern and Western populations, though, and their general attitudes toward illnesses, disabilities, and handicaps was a limitation relative to interpretation and application to more specific problems.

A final problem was the difference in attitudes toward and treatment of the handicapped before and after the passage and implementation of the Rehabilitation Act of 1973. One assumed that since these laws were originating in a Western culture that they represented some of the predominant Western attitudes toward the handicapped. One also assumed that since there was such debate concerning their implementation in the community colleges in Hawaii that this was due to a clash of attitudes from the predominant Eastern cultures. Otherwise, one assumed that the difficulty lay in the process of the laws

attempting to influence the creation of new attitudes for both Easterners and Westerners while past attitudes were still very influential. The attitudinal problem, therefore, lay somewhere between the attitudes expressed by the laws, and, the attitudes of institutional segregation for the handicapped historically expressed by the Westerner and family segregation for the handicapped historically expressed by the Easterner.

CHAPTER II

REVIEW OF RELATED LITERATURE

The most recent literature which was relevant to the multi-faceted aspect of this project were two publications previously mentioned. During 1977, the White House Conference on Handicapped Individuals published a series of workbooks detailing the results of the various workshops held and summaries of awareness papers presented at the Conference. For this study the most valuable workbook was the one on Special Concerns which contained articles on civil rights issues and articles which first identified the problem of cultural attitudinal differences toward handicapped individuals. John Gliedman's August, 1979, Psychology Today article on 'Handicapped Liberation' was one of the best summaries on Western (American) attitudes toward the handicapped as well as an excellent presentation of the idea of Handicapped Liberation as the most recent civil rights issue and its failure because of attitudinal problems.

The ideas contained in this literature were supported by two other assessments. First, a study detailing the reality of the multi-dimensional phenomena of attitudes toward disabled persons.[13] This study looked at attitude formation as the possible result of

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[13]Frank L. Sieka, Marceline E. Jaques, and Robert R. P. Hartl, "Attitudinal Factor Patterns Across Three Cultures: Denmark, Greece, and the United States," The International Journal of Social Psychiatry, (Spring-Summer, 1973), 10.

unidimensional influences, or, everyone holding similar attitudes toward such a global phenomena as disabling conditions. The study concluded, however, that attitude formation toward disabling conditions was the result of multidimensional influences including personality, situational considerations, and cultural values.

Second, the results of a survey done at the University of California at Berkeley and funded by the National Science Foundation lent support to this study's recognition of attitude problems toward handicapped individuals within the educational setting. The Supreme Court recently ruled on the Davis case supporting a college's refusal to accommodate a deaf student in a nursing program. The Berkeley survey revealed the source of the Justices information used to support their decision - the faculty of the college in question. The Berkeley survey stated that

> Colleges and universities are 'massively out of compliance' with Section 504 of the Rehabilitation Act of 1973 because their perceptions of the potential of their handicapped students are too low.[14]
>
> Our report is the first time that anybody had done a test to see whether or not faculty know what they are talking about. What we found is that faculty preconceptions are consistently unreliable - their preconceptions are consistently too low. Nonetheless they continue to discriminate on the basis of those perceived

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[14]Disabling the Disabled: Discrimination in Higher Education, results of a study funded by the National Science Foundation (Lawrence Hall of Science at the University of California in Berkeley, California, 1980), p. 1.

> incapacities, and those perceived incapacities are imaginary.[15]

An October, 1979, article in Vocational Education made very much the same statement: that parents maintain low career aspirations for their handicapped children because they have a limited knowledge of what disabled adults are able to do and because their negative attitudes are reinforced by teachers that the parents meet during the children's early school years.[16]

Some of the best historical and cultural information reviewed for this study came from attendance at and participation in a series of Distinguished Dialogues, 1979-80, conducted by the Handicapped Services Training Program, A University of Hawaii Affiliated Facility - working primarily to inform the public about Developmental Disabilities. On October 8, 1979, Dr. George Fargo presented a paper on, "The History of Attitudes Toward the Handicapped." His emphasis was Western as he delineated the Western, Medieval origins of the word handicapped. Out of the plagues and chaos of the Early Middle Ages, beggars survived by approaching one with their cap in their hand, asking for alms.[17] The Eastern parallel with India's lower castes (outcasts) was striking as to be an outcast is to be handicapped.

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[15]Ibid., p. 7.

[16]Frank Bowe and Jane Ann Razeghi, "Enabling the Disabled Through Career Counseling," Vocational Education, October, 1979, p. 45.

[17]Presentation of Dr. George Fargo for the Handicapped Services Training Program, "History of and Attitudes Toward the Handicapped," Moiliili Library, Honolulu, Hawaii, October 8, 1979.

Individuals with disabling conditions are trapped in a web of perjorative terminology: unfortunate sufferers, victims who are afflicted and restricted, or, one is a poor soul confined to crutches or a patient bound to a wheelchair. "The use of such negative language serves to perpetuate the attitudinal barriers faced by handicapped individuals."[18]

The study which most closely paralleled this investigation was a 1968 study conducted by the College of Education at Michigan State University, the Latin American Studies Center.[19] Most of the countries surveyed in this study, which also utilized a Likert Summated Rating Scale, were Western; one was Eastern - Japan. Great emphasis was finally placed on the relationship between industrialization and attitude formation and change as a nation's economic condition improved. Yet, despite industrialization, Japan continued to hold onto and revere several traditional values and biases - including attitudes toward their disabled.

There were several studies which reached similar conclusions as the Eleven-Nation study. The United Nations has fostered several studies to support resolutions of the General Assembly declaring the rights of the disabled and the mentally retarded in member nations.

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[18]Perjorative Terms and Attitudinal Barriers, Hawaii State Commission on the Handicapped, Ha'ilono Kina, (Honolulu, Hawaii: State Commission on The Handicapped), Vol. 6, November, December, 1979.

[19]John E. Jordan, Attitudes Toward Education And Physically Disabled Persons In Eleven Nations (East Lansing, Michigan: Latin American Studies Center, Michigan State University, 1968), p. 35.

These studies invariably discussed the economic conditions responsible for the creation of disease and disabling conditions. There are definitely differences in attitudes toward the handicapped within Socialist and Capitalist countries. In Socialist countries, the attitude of social and group responsibility is much greater than in Capitalist countries where individualism and competition is the emphasis. In Socialist Denmark and Bulgaria, for example, the greater educational, recreational, and vocational support is given to the mentally retarded and their families after the children reach sixteen. One of the best studies comparing attitudes in a Socialist or Capitalist setting is by Leopold Lippman.[20]

The Eastern side of this historical/cultural economic scene is a 1970 study done by the International Society for Rehabilitation of the Disabled.[21] The two Americans who conducted this study, were perplexed from the beginning of their work that the word rehabilitation is a Western word.

> The Hindu religion stressed the value of charity, philanthropy, and mutual aid, but the doctrine of Karma has militated against the handicapped since it is believed that the handicap represents retribution for sins committed in a previous incarnation and therefore any effort to improve their lot would interfere with the workings of divine justice.[22]

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[20]Leopold D. Lippman, Attitudes Toward The Handicapped, A Comparison Between Europe and the United States (Springfield, Illinois: Charles C. Thomas Publisher, 1972), pp. 1-109.

[21]Wallace W. Taylor and Isabelle Wagner Taylor, Services For the Handicapped In India (New York, New York: International Society for Rehabilitation of the Disabled. 1970). [22]Ibid., p. 8.

One must understand that Hinduism gave birth to Buddhism and that Buddhism became the most influential belief system in the East. One is presented here with the Eastern view that a handicapping condition is an individual and family punishment and responsibility versus the Western Judeo-Christian concept that God presents challenges more than chastisements and expects society as a whole to respond to and accept responsibility for such external battles such as the war against disability. In the East, the state of one's soul or body is a matter of internal spiritual concern.

> There is thus continuing concern and perplexity as to the social and psychological implications of the Buddhist law of Karma, or the doctrine of reincarnation in relation to the significance of handicapping conditions and antisocial behavior.[23]

Finally, two pieces of literature which added scope to this study were a study in England, by E.J. Miller and G.V. Gwynne, 1972,[24] and, a local (Hawaiian) study in progress by Milton Bloombaum and Ted Gugelyk of the University of Hawaii.[25] In "A Life Apart", support is lent to the segregation aspects of handicapping conditions both from a social and individual standpoint. Segregation is one of the

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[23]Ibid.

[24]E. J. Miller and G.V. Gwynne, A Life Apart, A pilot study of residential institutions for the physically handicapped and the young chronic sick (London, England: Tavistock Publications, J.B. Lippincott Company, 1972), pp. 41-54.

[25]Milton Bloombaum and Ted Gugelyk, "The Laws of Attitude when Disease Is The Object,". Paper prepared for presentation in the Establishing Laws of Human Behavior session, at the International Sociological Association's IX World Congress, Uppsala, Sweden, August 14-19, 1979.

first laws learned if one is handicapped - the Easterner isolates one within the family, the Westerner tends to isolate the handicapped individual within a variety of institutional settings. Bloombaum and Gugelyk also search for "The Laws of Attitude when Disease Is The Object." In their specific study of lepers at Kalaupapa peninsula on the island of Molokai, they concluded that the first law of attitude was that the unafflicted react favorably to the afflicted while reacting unfavorably to the disease with which they are afflicted.[26] If this is the first law of attitude and it seems fairly positive, perhaps there is yet hope, with the help of education, for the successful implementation of the handicapped legislation.

One could also not put together a study like this without the aid of a comprehensive World History. The best is by diffusion historian William McNeill from Northwestern University,[27] who was a John A. Burns visiting professor at the University of Hawaii in the Spring, 1980. He delivered a series of lectures re-emphasizing his views of cultural differences between the cyclical East and the linear West from which many of the Research Questions for this study originated.

The specific East/West dichotomy around which this study was structured is as follows: Westerners, historically have held to a

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[26]Ibid., p. 8.

[27]William H. McNeill, A World History (New York, New York: Oxford University Press, 1971).

linear concept of time whereby it is believed that an individual has but one earthly lifetime. The Westerner, therefore, is also concerned about time, worries and hurries a lot and tends to be quite intolerant toward other philosophical viewpoints the consideration for which the Westerner has little time. Lineality also, though, tends to make the Westerner quite externally oriented as life is perceived as a string of changes which require all of one's attention. This concept of change is reflected in Western legal and political systems which display a sense of alteration and flexibility to fit the changing times. Based on these historical/cultural perceptions, it seemed likely that the Westerner would view handicapping conditions as external, social and institutional responsibilities. A disabling condition would be no one's fault in particular, not punishment from the gods, but rather, an accident of nature. In this sense, the disability would be viewed as another external challenge where, conceivably, a handicapped individual could achieve independence and full employment. If life is perceived as changeable, it is also seen in progressive terms. All things, including disabling conditions could improve. External directedness would also lead the Westerner to directing the handicapped individual into society, or, the great outside. External directedness, also, eventually leads to a perception of an integrated society built on integrated support systems.

Easterners, on the other hand, historically have held to a cyclical concept of time whereby, among other things, it was believed that an individual has several earthly lifetimes. The Easterner is not

concerned about time, and tends to structure legal and political systems as if they were as stable and enduring and unchanging as life. The family circle becomes especially important to the Easterner who blends into this group, does not individualize oneself, and does all to keep from shaming or dishonoring the group. The Easterner's life is quite tolerantly and internally directed while the externals of life like law and politics are left to stagnate or stabilize depending on one's viewpoint. Based on these historical/cultural perceptions, it seemed likely that the Easterner would view handicapping conditions as internal, family responsibilities. A disabling condition could be the result of problems incurred in previous lifetimes, a burden, therefore, representing some shame and guilt for the family as well as the individual. The disability becomes an internal problem dependent on the private, special, segregated care of the longevity of the family. Becoming part of the external, social world is not the prime consideration for the handicapped individual within this perception. Employment is also not a great consideration, nor therapy, or rehabilitation services. The inner direction of the Easterner precludes too much external, disordering participation.

CHAPTER III

PROCEDURES AND METHODOLOGY

This study was primarily a research effort and the general research methodology used was a combination of historiography and descriptive survey. There were two methodological techniques attempted. Historical, sociological, and psychological research on the general attitudinal differences toward illnesses, disabilities, and handicaps historically held by Easterners and Westerners was explored - along with some analysis of the reasons for these differences. An attitude questionnaire based on the Likert procedure of summated ratings and consisting of statements about handicapping conditions taken from recent handicapped legislation and related to the research questions was given to the entire faculty at Kapiolani Community College and Leeward Community College.

Population: The attitude questionnaire given the faculty at Kapiolani and Leeward Community Colleges (See Appendix A) did not act as an experimental treatment but was considered as part of the data collected to provide evidence for this problem. This data could be related to the research questions because it provided the participant the opportunity to respond in terms of agreement or disagreement to attitudes toward the handicapped expressed in the equal educational accessibility laws. (See Table 1) Kapiolani Community College was one of the older community college campuses and the faculty tended to

be a bit older than on some of the newer college campuses (Leeward, Windward).[28] The faculty at Kapiolani Community College were approximately fifty percent Western and fifty percent Eastern with the Eastern faculty being primarily second generation.[29] Leeward Community College faculty were more than fifty percent Eastern and also primarily second generation.

Design of Survey Instrument: The idea behind the questionnaire was to attempt to allow the research questions and handicapped laws to speak for themselves. Statements about the handicapped taken from the law and related to the research questions were presented for the participant's agreement or disagreement. "Likert's (1932) scaling technique required a large number of monotone items, i.e., items having the characteristic that the more favorable the individual's attitude toward the attitude object, the higher his expected score for the item."[30] The questionnaire requested the participant to indicate her/his ethnic background, generation, and campus position. The higher total score for a questionnaire was expected to reflect a positive attitude toward the handicapped legislation. The lower total score for a questionnaire was expected to reflect attitude variances with the law, and possibly, cultural anxieties with the law.

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[28]Statistic given by John Fry, Director of Community Services, Kapiolani Community College, Honolulu, Hawaii, September, 1979.

[29]Ibid.

[30]Marvin E. Shaw and Jack M. Wright, Scales For the Measurement of Attitudes (New York: McGraw-Hill Book Company, 1967), p. 24.

The questionnaire statements were randomized. The total number of questions were limited so that each individual response could be examined.

With a Likert Summated Rating, it was known from the start what was the desired range of answers, per question. In the questionnaire grading key in Appendix A, the direction of each question is indicated. With a choice of five possibilities, five was the highest number of points to be made on each question and seventy-five the highest score for one questionnaire. The survey was designed so that each individual questionnaire total could be tabulated. Average scores were calculated by adding the total scores of Western and Eastern populations by campus and dividing by the number of respondents for that population. Since the handicapped legislation was a Western phenomena, the desired answer to each question was directed to a best possible Western answer. By reading the research questions in Table 1 along with the accompanying statement from the handicapped legislation, the proper direction of a most favorable response to each questionnaire statement can be observed.

Data Collection: At both Kapiolani and Leeward Community Colleges, the questionnaire was given to the entire faculty through the division chairperson. Administration received this material individually and personally. At Kapiolani Community College, the Dean of Community Services assisted in the dispersal and collection of materials. At Leeward Community College, the materials were handled by the Handicapped Officer.

Data Analysis: A great deal of historical time went into the making of an attitude which may or may not retain its potency into the present. In an affluent American state like Hawaii, the Westerner was not only removed from the puritanical origins of an attitude but the Easterner was two and sometimes three generations removed from an original cultural background. These time and geographic differences moderated the conclusions made by this study. When one deals with attitudes, one deals with the most difficult variable to control or predict. The generalizability of this problem was difficult to ascertain. The point of this study was not to accept or reject hypotheses, but to provide evidence for the possibility of the theory and the problem and potential problems involved in the research questions.

After average scores were calculated by population and generation, questionnaire items were grouped into percentages based on total population numbers which responded to the questionnaire. Research questions were subdivided into Eastern and Western perceptions and related to specific racial and generation groupings to determine specific responses to specific issues in the questionnaire. These responses were tabulated and visually represented. These responses dealt with differences: general trend differences among the questionnaires, East/West differences, differences between Westerners at Leeward Community College and Kapiolani Community College, and differences between second and third generation Easterners at LCC and KCC. Anticipated and actual East/West response to each question was charted as answers were analyzed. (See Chapter IV, Presentation of Results).

Since the questionnaire attempted to reveal the traditional sense behind an attitude, it was anticipated that the data resulting from the questionnaire would reveal the maintenance and continued influence of traditional beliefs and attitudes. It was expected, therefore, that analysis of this data would approximately follow from the discovered traditional attitudes upon which the research questions were built. From analysis of questionnaire data, it was expected that an East/West attitudinal difference towards handicaps, illnesses, and disabilities would be displayed. Easterners had traditionally perceived handicaps as a family responsibility while Westerners emphasized society's responsibility. Westerners, therefore, were expected to respond quite agreeably to items like full employment, rehabilitation services, and government subsidies. Easterners, on the other hand, were expected to reveal their absorbing-into-the-family tendencies by not responding to those items as favorably.

Westerners were expected to reveal an open social and external attitude toward the handicapped by responding favorably to the concepts of independence and integrated education for the handicapped. It was thought that Easterners would respond less agreeably to those items and more favorably to concepts like dependence and segregated education. It was expected that analysis of the Westerners' responses would reveal a greater sense of traditional individualism attitudinally at work in answering the questionnaire, while analysis of Easterners' responses would reveal a more traditional sense of family togetherness and lack of emphasis on individualism. Finally,

analysis of data from the questionnaire was expected to reveal the traditional religious foundation of East/West attitude formation - that Easterners perceived handicapping conditions as personal and family burdens the guilt for which accrued to the individual. Westerners, however, were expected to perceive handicapping conditions as challenges or accidents of nature which made society responsible for their solution. Data analysis would have to be based on all these traditional perceptions and considerations.

TABLE 1

RELATIONSHIP BETWEEN RESEARCH QUESTIONS, QUESTIONNAIRE STATEMENTS, AND HANDICAPPED LEGISLATION

RESEARCH QUESTIONS	QUESTIONNAIRE STATEMENT	HANDICAPPED LEGISLATION
Is there any difference in Eastern and Western attitudes toward handicaps, illnesses, and disabilities?	There do exist attitudinal differences toward the handicapped.	No reference in the law.
Do Easterners and Westerners perceive that a handicap is a family responsibility or a social responsibility?	Society has some responsibility for the education, employment, and medical care of the handicapped.	The law recognizes some responsibility for the handicapped.
	Society has no responsibility for the handicapped.	
Do Easterners and Westerners believe that segregated or integrated social and educational settings are best for a handicapped individual?	Integrated social and educational settings are best for the handicapped.	The law abrogates special segregated education for the handicapped.
	Special segregated education is best for the handicapped.	
Do Easterners and Westerners perceive dependence or independence for the handicapped?	The handicapped can become independent.	The law encourages individual independence for the handicapped.
Do Easterners and Westerners perceive partial or full employment for the handicapped?	The handicapped can attain full employment.	The law acts as affirmative action legislation for the handicapped.

TABLE 1 continued

RESEARCH QUESTIONS	QUESTIONNAIRE STATEMENT	HANDICAPPED LEGISLATION
Do Easterners and Westerners feel family shame and guilt relative to a handicapped member of the family?	A handicapping condition is both an individual and family burden. A handicap is an accident of nature. A handicap is no one's fault.	The law looks upon handicapping conditions as challenges.
Do Easterners and Westerners take advantage of medical and rehabilitative facilities for their handicapped?	Medical and rehabilitation facilities will always be needed and utilized by the handicapped and their families.	The law acknowledges financial aid for rehabilitation centers which encourage independence for the handicapped.
Do Easterners and Westerners perceive handicaps as an individual and family burden?	A handicapped individual will always be dependent on her/his family.	The law encourages individual independence for the handicapped.
Do Easterners and Westerners view handicapped individuals benefiting from a minimum or maximum segregated education?	Only Special Education teachers are equipped to teach the handicapped.	The law abrogates special, segregated education and places responsibility for implementation of the law on all teachers.
Do Eastern and Western families tend to absorb-for-life their handicapped member?	A handicapped individual will always be dependent on her/his family.	The law encourages individual independence for the handicapped.
Do Easterners and Westerners tend to direct their handicapped members into society?	The handicapped will always have to rely on welfare and disability supports.	The law encourages economic and employment independence for the handicapped.

TABLE 1 continued

RESEARCH QUESTIONS	QUESTIONNAIRE STATEMENT	HANDICAPPED LEGISLATION
Do Easterners and Westerners believe that the individual is responsible for oneself and should be worked with by special care units in society?	The handicapped will always have to rely on welfare and disability supports.	The law encourages economic and employment independence for the handicapped.

CHAPTER IV

PRESENTATION OF RESULTS

The attitude questionnaire was given to the entire faculty on two community college campuses: Leeward and Kapiolani. There were, however, three surveys taken from these two circulations. There was the Leeward regular survey and the Kapiolani regular survey. There was also a Leeward revised survey. The revised survey was suggested by the presence in four questions (numbers 3, 7, 12, 13) of what were considered power words or phrases: some, will always be, will always have to rely. These statements were initially phrased this way to attempt to reveal the linear perspective of Westerners that life consists of change and flexibility versus the cyclical perspective of Easterners that life consists of sameness, stability, and a certain amount of inflexibility. It was recognized, though, that those four statements could have been worded better, and a desire was created to see if there would be any different reaction if they were slightly revised. (See Appendix A). This revised questionnaire was recirculated only to Vocational Education and Math and Science Divisions at LCC. Since the revised survey was not included in the original proposal, its general results are presented here with the regular surveys for the sake of organization. A section has been added to Chapter V to accommodate the specific results of this revised survey

as well as any other results which were not forseen in the proposal. (See Chapter V, Observations).

At LCC, three hundred regular questionnaires were distributed, and one hundred sixty-two were completed and returned, a fifty-four percent response. At KCC, two hundred fifty regular questionnaires were distributed and sixty were completed and returned, a twenty-four percent response. And, one hundred of the revised questionnaires were distributed at LCC and forty were completed and returned, a forty percent response. (See Table 2). The KCC questionnaires were distributed and and collected primarily by mail. Questionnaires were distributed among all college personnel, part-time and full-time. Questionnaires were invalidated if returned unanswered but with comments or only partially answered but with comments. Decisions to invalidate were primarily based on the complete absence of any asked for information such as campus, generation, ethnicity, occupation. (See Table 2).

The diversity of Eastern and Western populations on both campuses was almost identical: West - Puerto Rican, German, American Indian, Swedish, Hungarian, Italian, Irish, Mexican-American, Dutch, Black; East - Hawaiian, Chinese, Japanese, Filipino. There were some generational differences between the populations on the two campuses. Second generation response from the Eastern population was about the same on both campuses given the total response, but third generation response was greater at LCC. (See Table 2). There was response from staff and administration on both campuses but the primary responders were faculty.

TABLE 2

QUESTIONNAIRE RESPONDENTS BY POPULATION,

EMPLOYMENT STATUS, ETHNIC GROUP

AND GENERATION

POPULATION

Institution	Number of Questionnaires Circulated	Number of Respondents	Number Invalidated	Total Number Used
Kapiolani	250	60	12	48
Leeward	300	162	24	138
Leeward Revised	100	40	5	35

EMPLOYMENT STATUS

Institution	Administration	Faculty	Staff	Total
Kapiolani	2	44	2	48
Leeward	6	100	32	138
Leeward Revised	0	33	2	35

ETHNIC GROUP AND GENERATION

Institution	Western	Eastern/Generation				Total
		1st	2nd	3rd	4th	
Kapiolani	26		11	11		48
Leeward	67		18	52	1	138
Leeward Revised	17	2	7	8	1	35

The averages of the attitudinal scores for both campuses were very close. Western respondents to the regular and revised surveys had the highest scores followed by the score of the LCC third generation Eastern respondents. The KCC survey followed in order of West and East. The LCC revised survey revealed the same score for Westerners as the regular LCC survey, but the Eastern response here was the lowest. (See Table 3). High individual scores were not terribly high. More important, though, low individual scores were not terribly low. Overall, scores were quite median and monotone and did not seem to reflect as great an attitudinal difference between Easterners and Westerners as had been expected.

TABLE 3

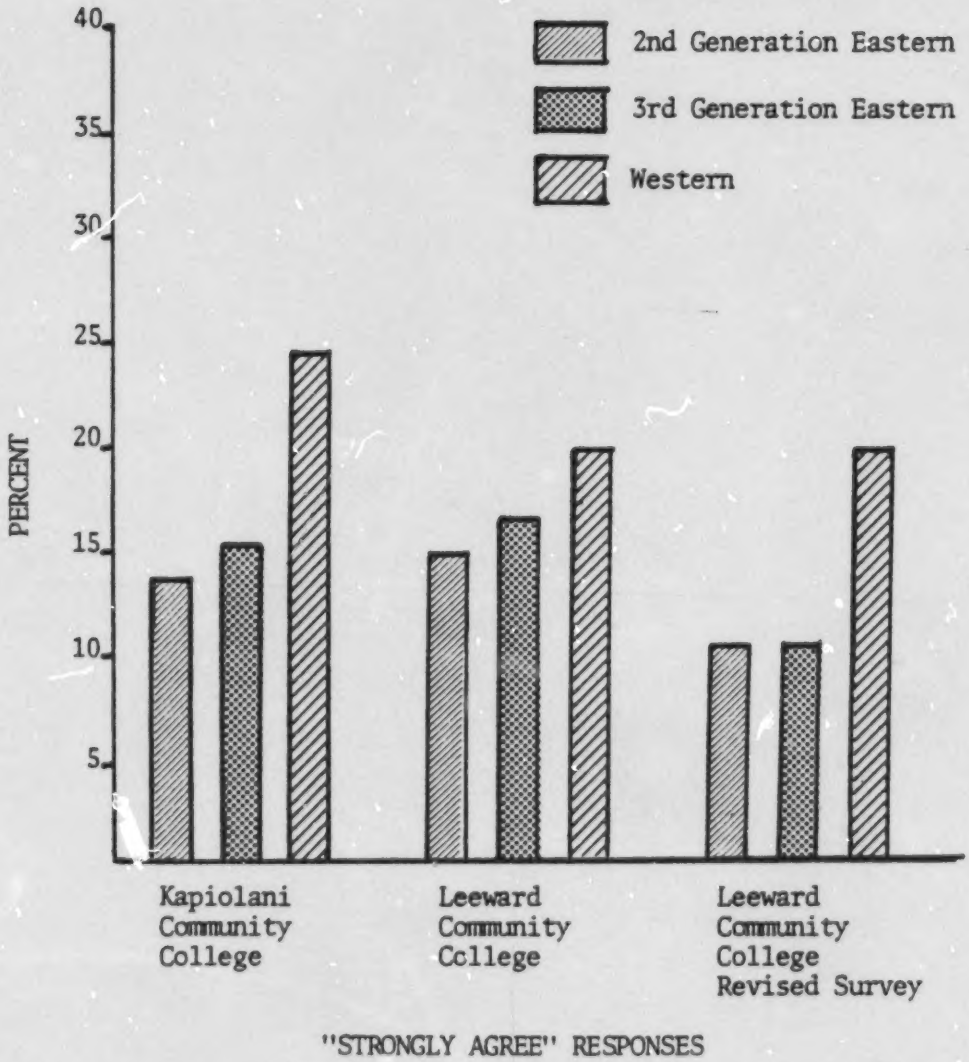
AVERAGE ATTITUDE SCORES BY POPULATION,

ETHNICITY AND GENERATION

POPULATION	WESTERN	EASTERN	
		2nd generation	3rd generation
Kapiolani Community College	54.8	54	52
Leeward Community College	56	54	55
Leeward Community College Revised Sample	55.7	51	52.3

There were some general trends which stood out. Westerners were more consistent with their use of the Strongly Agree choice (See Graph 1). Easterners and Westerners responded differently to the perception of ethnic attitudinal differences, (question number one). Westerners thought there were ethnic attitudinal differences toward the handicapped more than Easterners. (See Table 4). Twelve percent of the Easterners who responded to question number eight on segregated education agreed that segregated educational services were best for the handicapped. (See Table 4). There was an eight percent Western agreement to this question as well. (See Table 4). On the question of integrated education, (question number five), there was a four percent difference between the respondents with Westerners being more consistently in agreement. On the question of whether or not a handicapping condition was an accident of nature, (question number eleven), there was a fourteen percent difference with more Westerners in agreement.

These general trend differences were compiled by calculating a percent response by dividing the number who answered Agree and Strongly Agree by the total response to the questionnaire item. In this instance of searching out general trends, percentages in Table 4 were compiled by utilizing five Eastern populations: LCC Regular third generation Eastern, LCC Regular second generation Eastern, LCC Revised Eastern, KCC third generation Eastern, and KCC second generation Eastern. Three Western populations were utilized: LCC Regular and Revised Western, and KCC Regular Western.



Graph 1. Percent of East/West "Strongly Agree" Responses

TABLE 4

GENERAL TRENDS: EAST/WEST RESPONSE OF AGREE AND STRONGLY AGREE TO THE FOUR QUESTIONS MOST RELEVANT TO REVEALING INTERNALIZATION OR EXTERNALIZATION OF ATTITUDES

Question		East		West	
#1	There do exist ethnic attitudinal differences toward the handicapped	49/105	47%	57/106	54%
#5	Integrated social and educational settings are best for the handicapped	74/104	71%	79/106	75%
#8	Special segregated education is best for the handicapped	12/104	12%	8/106	8%
#11	A handicap is an accident of nature	34/95	36%	52/103	50%

The following surveys were utilized for this table:
Kapiolani Community College regular survey
Leeward Community College regular survey
Leeward Community College revised survey

General East/West differences were determined by eliminating the LCC Revised survey and comparing the second and third generation Eastern populations of LCC and KCC and the Western populations of LCC and KCC. In this instance, percentages of questionnaire items from the Strongly Agree and the Agree choices were calculated in the same manner as utilized in Table 4. These East/West differences were charted as to their relationship to the anticipated level of agreement East and West for each question: + = expected or anticipated result and o = unexpected or unanticipated result. (See Table 5). This charting system was utilized on the next two tables as well. Since the questions had a Western direction based on statements in the handicapped legislation, it was anticipated that Westerners would agree more readily where Western concepts were heavily emphasized. For example. Western concepts like societal responsibility in question number three, integration in question number five, independence in question number six. On the other hand, it was anticipated that Easterners would agree more readily where Eastern concepts were heavily emphasized. For example, Eastern concepts like burden in question number two, dependence in question seven, segregation in question eight. Some questions turned out as anticipated; most did not. (See Table 5).

The concept examples cited above were consistently utilized throughout the questionnaire in different forms in order to evoke a degree of agreeable response from the participants. For example, the use of Special Education teachers in question number four was seen as reactive in different ways for the integrated-oriented Westerner and

TABLE 5

EAST/WEST DIFFERENCES: AGREE & STRONGLY AGREE RESPONSES

Question	East		West		+ As Expected o Not As Expected
1. Ethnic Attitudes differ	39/87	45%	49/90	51%	+
2. Handicapped are burden	68/88	77%	77/91	85%	o
3. Social responsibility	81/90	90%	83/93	89%	o
4. Special Ed. teachers	17/90	19%	9/86	10%	o
5. Integrated Ed.	51/88	58%	67/89	75%	o
6. Independence of handicapped	81/90	90%	80/91	88%	o
7. Dependence of handicapped	13/90	14%	4/91	4%	o
8. Segregated Ed.	10/86	12%	7/89	8%	o
9. Full employment of handicapped	73/83	88%	77/87	89%	o
10. No social responsibility	2/88	2%	4/90	4%	o
11. Handicap is accident of nature	31/87	36%	43/86	50%	+
12. Rehabilitation provided	59/86	69%	67/90	74%	o
13. Economic subsidies	11/88	13%	6/89	7%	o
14. Anyone can teach handicapped	48/86	56%	63/92	68%	o
15. Guilt for the handicapped	66/89	74%	54/88	61%	o

the segregated-oriented Easterner. Full rather than partial employment in question number nine was also viewed as reactive in exactly the same way. The Westerner supposedly perceived full integration into society; the Easterner did not. In questions number ten, twelve, and thirteen, the Westerner was expected to react in a more socially-conscious manner agreeing that such social facilities as rehabilitation and welfare were part of society's responsibility toward the handicapped. The family-oriented Easterner was expected to respond in the opposite manner. Questions number eleven and fifteen appealed to the social guilt of the Westerner versus the individual and family guilt of the Easterner. And, question number fourteen re-emphasized the integration/segregation differences perceived to exist between Easterners and Westerners. (See Appendix A - Questionnaire).

Another way of visualizing each question of the survey from the standpoint of perceived and anticipated levels of agreement from Easterners and Westerners would be to look at the questionnaire samples in Appendix A in the following manner.

Question number one - ethnic differences - more agreement was expected from Westerners.

Question number two - handicap as burden - more agreement was expected from Easterners.

Question number three - social responsibility for the handicapped - more agreement was expected from Westerners.

Question number four - special education teachers - more agreement was expected from Easterners.

Question number five - integrated education - more agreement was expected from Westerners.

Question number six - independence for the handicapped - more agreement was expected from Westerners.

Question number seven - dependence of the handicapped - more agreement was expected from Easterners.

Question number eight - segregated education - more agreement was expected from Easterners.

Question number nine - full employment for the handicapped - more agreement was expected from Westerners.

Question number ten - no social responsibility for handicapped - more agreement was expected from Easterners.

Question number eleven - social guilt for handicap - more agreement was expected from Westerners.

Question number twelve - social facilities for handicapped - more agreement was expected from Westerners.

Question number thirteen - social support for handicapped - more agreement was expected from Westerners.

Question number fourteen - educability of handicapped - more agreement was expected from Westerners.

Question number fifteen - individual guilt for handicap - more agreement was expected from Westerners.

Considering Table 5, it can be seen how the Eastern and Western populations on the regular surveys differed and the unbalanced relationship between perceived expectations and realized results.

Two questions worked as expected. In question number one, Westerners perceived greater ethnic attitudinal differences toward disabilities than Easterners. In question number eleven, Westerners viewed handicapping conditions as accidents of nature more than Easterners. One question was quite close to working as expected. Westerners did agree favorably to integrated education in question number five. Only fifty-eight percent of the Easterners agreed to this question. Three questions operated in a reverse manner than expected. In question number two, Westerners perceived handicapping conditions more burdensome than Easterners. In question number three, Easterners saw the handicapped as a social responsibility more than Westerners. In question number six, Easterners thought the handicapped more capable of independence than the Westerners.

Three questions had unexpectedly low percentages of agreement, yet they were high enough to be taken into consideration. In question number four, nineteen percent of the Easterners expressed a preference for Special Education teachers and ten percent of the Westerners agreed. In question number eight, twelve percent of the Easterners expressed a similar preference for segregated education and eight percent of the Westerners agreed. In question number fourteen neither the Easterners or the Westerners expressed a high percent of enthusiasm that any willing teacher could teach the handicapped. Question number fourteen was also quite close to working as expected.

In two questions, numbers seven and thirteen, Eastern response was not as expected but percents here were still high enough to deserve some consideration. Fourteen percent of the Easterners thought handicapped individuals would always be dependent on their families, while thirteen percent thought that handicapped individuals would always require welfare supports.

One question did not seem to work at all, number ten. In question number nine, both Easterners and Westerners responded most agreeably to full employment for the handicapped. The consistent need of rehabilitation facilities was agreed to by both populations, question number twelve. Question number fifteen, interestingly, was the reverse of number eleven even though the ideas expressed in the questions or statements were the same. (See Table 5).

Campus differences between LCC and KCC were also calculated by utilizing the Agree and Strongly Agree choices only and calculating percentage differences as had been done for Tables 4 and 5. Table 6 represents differences between the Western populations of KCC and LCC. Table 7 represents differences between the Eastern populations on these two campuses by comparing the second and third generation responses.

Western population response worked out as expected but with some exceptions. (See Table 6). On both campuses, Westerners responded more agreeably to the concept of burden in question number two which had been anticipated to appeal more to Easterners. On both campuses, there was disagreement to the consistent need for

TABLE 6

CAMPUS DIFFERENCES: AGREE & STRONGLY AGREE

RESPONSES BY WESTERNERS

Question	LCC	KCC
	+ Response as Expected	o Response Not as Expected
1. Ethnic Attitudes differ	37/66 56% +	12/24 50% +
2. Handicapped are burden	54/66 82% o	23/25 92% o
3. Social responsibility	60/67 90% +	23/26 88% +
4. Special Ed. teachers	6/63 10% +	3/23 13% +
5. Integrated Ed.	50/66 76% +	17/23 74% +
6. Independence of handicapped	58/66 88% +	22/25 88% +
7. Dependence of handicapped	2/65 3% +	2/26 8% +
8. Segregated Ed.	5/66 8% +	2/23 9% +
9. Full employment of handicapped	53/63 84% +	24/24 100% +
10. No social responsibility	4/65 6% +	0/25 0% +
11. Handicap is accident of nature	28/63 44% o	15/23 65% +
12. Rehabilitation provided	48/66 73% +	19/24 79% +
13. Economic subsidies	4/65 6% o	2/24 8% o
14. Anyone can teach handicapped	42/67 63% +	21/25 84% +
15. Guilt for the handicapped	37/64 58% +	17/24 71% +

welfare supports for the handicapped, question number thirteen. LCC Westerners did not respond to a handicapping condition as an accident of nature in number eleven.

Percents showing preference for Special Education teachers was high on both campuses, question number four. It was expected that percentages for integrated education would be higher, question number five. An eight percent agreement at KCC on the dependency of the handicapped seemed high enough to receive attention, question number seven, while the percentages expressing agreement to segregated education also seemed considerable on both campuses, question number eight.

KCC expressed a one hundred percent agreement with the employability of the handicapped, and a seemingly high eight percent concern over continuing economic supports for the handicapped, numbers nine and thirteen. Both campuses did not seem to respond as enthusiastically or agreeably as expected to the no-fault aspect of disabling circumstances in question number fifteen. (See Table 6).

The reason for calculating only the Agree and Strongly Agree choices to arrive at all the percentages utilized on these tables was to attempt to best visualize the anticipated versus the actual direction of the responses to the questionnaire. The majority of the Eastern responses did not proceed in the opposite of the intended Western direction of the questionnaire as had been anticipated. This phenomena is best visualized with the comparison

of the second and third generation Eastern populations at KCC and LCC. (See Table 7).

Campus differences here between KCC and LCC are best summarized.

Question number one - Eastern response was not as agreeable to ethnic attitudinal differences toward disabilities except third generation at LCC.

Question number two - second generation at KCC disagreed to the burdensomeness of a disability.

Question number four - second generation percents expressing agreement with Special Education teachers for the handicapped were quite high on both campuses.

Question number five - agreement to integrated education was not terribly high on either campus.

Question number seven - percents agreeing to dependency of handicapped seem high here when compared to very high percentages for independence in question number six.

Question number eight - high percentages here on segregated education complement low percentages on integrated education in question number five, except third generation at LCC.

Question number eleven - attempted to appeal to individual and family guilt of Easterner, and worked as expected.

Question number thirteen - LCC third generation did not respond as agreeably to consistent rehabilitation needs and supports.

Question number fourteen - second generation at LCC and third generation at KCC did not agree that any willing teacher could

TABLE 7

SECOND & THIRD GENERATION DIFFERENCES: AGREE & STRONGLY AGREE RESPONSES BY EASTERNERS

+ Response as Expected o Response Not as Expected

Question	LCC 2nd.	LCC 3rd.	KCC 2nd.	KCC 3rd.
1. Ethnic Attitudes differ	5/17 29% +	25/50 50% o	4/9 44% +	5/11 45% +
2. Handicapped are burden	11/16 69% o	43/51 84% o	4/10 40% +	10/11 91% o
3. Social responsibility	16/17 94% o	45/51 88% o	10/11 91% o	10/11 91% o
4. Special Ed. teachers	4/17 24% o	8/51 16% o	3/11 27% o	2/11 18% o
5. Integrated Ed.	12/17 71% o	38/51 75% o	5/9 56% o	6/11 55% o
6. Independence of handicapped	14/17 82% o	46/51 90% o	10/11 91% o	11/11 100% o
7. Dependence of handicapped	3/17 18% o	6/51 12% o	2/11 18% o	2/11 18% o
8. Segregated Ed.	3/15 20% o	3/49 6% o	2/11 18% o	2/11 18% o
9. Full employment of handicapped	15/15 100% o	40/47 85% o	9/10 90% o	9/11 82% o
10. No social responsibility	0/17 0% o	2/51 4% o	0/9 0% o	0/11 0% o
11. Handicap is accident of nature	5/17 29% +	20/50 40% +	3/10 30% +	3/10 30% +
12. Rehabilitation provided	16/17 94% o	29/51 57% o	8/10 80% o	6/8 75% o
13. Economic subsidies	1/15 6% +	10/51 20% +	0/11 0% +	0/11 0% +
14. Anyone can teach handicapped	1/17 5% +	36/48 75% o	7/11 64% o	4/10 40% +
15. Guilt for the handicapped	11/17 65% o	39/50 78% o	9/11 82% o	7/11 64% o

teach the handicapped.

Question number fifteen - tracked typically as the reverse of number eleven which was, essentially, the same question. (See Table 7).

Given the Western direction of the questionnaire, it was expected that the individual and average scores of the Western populations would be much higher than those of the Eastern populations. This was not the case. (See Table 4). It was anticipated that Westerners would attitudinally respond to the handicapped based strongly on the Western tradition of externalization where external problems and change, or handicapping conditions were accepted into the process of historical change and dealt with in an open and integrated social manner. Given the moderate to lower scores of Westerners and an eight percent choice for segregated education, (See Table 4), such did not seem to be the case to the degree expected. Also, the average scores of Easterners were so close to the average scores of Westerners, they did not seem to be acting in a traditional manner either except in the instance of some choice for segregated education, (See Table 4), which was anticipated based on their tradition of internalization of problems and isolation of the handicapped within the family. For the most part, though, Easterners who answered the questionnaire seemed to be attitudinally moving from older to newer, and more Western, traditions.

There were some "classic" responses to the questionnaire and a very significant part of this questionnaire was the verbal, prose statements that almost all respondents wrote on their papers. Written

scores revealed moderately positive attitudes of both Easterners and Westerners to the Handicapped Legislation, but verbal, prose responses, not asked for but included in the returned and completed questionnaire, were quite emotional, negative and sometimes abusive. The most consistent statement was a complaint about the generality of the way the word handicap was used throughout the questionnaire. The next most consistent statement was a request to qualify the type of handicap under discussion. The point of the questionnaire, though, was not specific handicapping conditions but the state of being handicapped for at least ten million Americans. Most respondents to the questionnaire seemed to have a difficult time thinking of the handicapped as a group of disenfranchised citizens as they had come to recognize Blacks and Women.

Some of the following written statements were especially interesting: in response to a handicap being an individual and family burden - "now, a burden of the college instructor;" in response to the dependence or independence of the handicapped - "families keep their handicapped children dependent;" "Psychological barriers about (attitudes toward) the handicapped maintain barriers of access for them;" is a handicap an accident of nature? - "God only knows!" (See Appendix B).

CHAPTER V

INTERPRETATIONS, CONCLUSIONS, OBSERVATIONS AND RECOMMENDATIONS

Interpretation of Results

It would seem that John Gliedman was correct with his idea that "Handicapped Liberation" is in trouble in America because of the consistency of perceiving handicapped individuals as sick children requiring special and segregated services. The difference between the positive scores on the questionnaire and the verbal, written reactions of both Easterners and Westerners demanding a quantification of what handicaps were being referred to revealed the presence of a deeper problem and feelings toward handicapped individuals than the statements of the questionnaire could tap. Black and Female Liberation movements finally became successful when individuals were no longer specified but the group, as a whole, was recognized as disenfranchized. The handicapped have not reached that legal, political point in the minds of most people. Their problems are still seen in terms of physical illness rather than legal and political rights wherein implementation of the law could make them more free, more independent, more powerfully educated. But, the handicapped are different, you say - after all, they are handicapped. For a while in this country, and still somewhat, being black or female was quite a handicap. Now, consider the problems of political struggle of the black female in

a wheelchair who must battle for better transportation facilities to get to a school or voting booth.

The average scores on the questionnaire were positive although monotone. (See Table 3). Professor Bloombaum's "First Law of Attitude When Disease is the Object" might have come into play here. (See Chapter II). Disease was not the object in the questionnaire; the individual was the object - the politics of being handicapped in America. Therefore, the respondents could react favorably to the law which the questionnaire delineated while, at the same time, being frustrated because the "disease" was not the object. Hence, the demand in writing for a specification of the "diseases" represented in the questionnaire. After all, how can one separate the handicapped individual from the "affliction" which is the handicapping condition?

It would also seem that there were some other cultural values at work to create the monotone scores on the questionnaire. Part of the Eastern value system is the idea of blending into the dominant culture to avoid disharmony or unstabling circumstances. Attitude questionnaires in this multi-cultural society are extremely difficult to use for this reason. The perceived acceptable response will, more often than not, be the result.[31] The Eastern idea, previously discussed, of Haji or shame enters into this kind of activity when, even in an anonymous situation such as answering a questionnaire, one might stand out from the group - that sense or value of invisibility

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[31]Conversation with Dr. George Fargo, Special Education, University of Hawaii, 1979.

might be lost. On receiving the revised questionnaire at Leeward Community College, it was discovered that the secretaries had not responded a second time. When the whole campus responds, their answers would stand out.

In other words, despite the fact that the average scores were moderately higher, there seemed to be a conflict between the scores and the comments written on the majority of the papers. (See Appendix B). This conflict was especially interesting in the light of answers to the first statement which were almost unanimously supportive of the multidimensional phenomena of attitudes toward disabled persons. (See Chapter II). Easterners and Westerners agreed that there probably were ethnic attitudinal differences toward the handicapped. Yet there was slight indication, given the scores, of what specifically those differences might be. Instead, the monotone scores reflected a sameness in attitude toward the law and the handicapped despite differing ethnic backgrounds. This phenomena itself might be the result of some of the limitations identified in this study - the homogeneity of the Hawaiian multi-cultural setting and the length of time removed from original cultural values. Third generation Japanese were some of the primary responders to the LCC regular sample. (See Table 2).

There also seemed to be an Eastern/ Western equality of attitude concerning the problems of teachers and the handicapped. The general comments, as well as the direction of some of the answers, supported the Berkeley study of low aspirations held toward the handicapped students by their teachers. (See Chapter II). To quote one of many

comments written on the questionnaires, "Some handicapped students do quite well in school; most do not." In their comments, respondenrs also continued to use the perjorative terminology too much associated with being hanidcapped: deaf and dumb, wheel-chair patients, cerebal palsy victims, retards.

> Jerome Stiller, professor of educational psychology at New York University, has done extensive studies on able-bodied people's expressed attitudes toward different disability groups. ... He uncovered a hierarchy of acceptability. The most acceptable disabilities were the relatively minor ones, like partial vision or hearing loss, a speech impediment or a heart condition. Amputees were a rung lower on the acceptability hierarchy. The deaf and the blind ranked somewhere in the middle, then came the mentally ill; below them stood people with epilepsy, cerebal palsy, or total paralysis.[32]

Bloombaum's study of attitudes toward lepers and leprosy discovered very much the same sort of disease and attitude hierarchy.

The general trends in the questionnaire were reflective of anticipated results where the scores were not. Easterners were expected to show more Shibui or restraint in their answers. They did so by not strongly agreeing. (See Graph 1). They were also expected to feel more favorably about segregated education for the handicapped - some educational arrangement which more privately linked the child strongly and for a long period to the family. They did so - but not to the degree expected. (See Tables 4-7). Since integration is a Western, revolutionary concept, the Western respondents were expected to agree on its enforcement through the law. They did so, but not always to the degree expected. (See Tables 4-6).

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[32]Gliedman, Op. Cit., p. 64.

Easterners were expected to reveal their Haji (shame, guilt) about handicapping conditions by responding to question eleven with a certain amount of self blame. They did so. (See Tables 4-7). Westerners responded to question number eleven typically. The Westerner always blames another external for any problem. Self blame is very unusual as a part of a Westerner's value system. (See Tables 4-6).

The differences between the campuses were more understandable after second and third generation respondents had been separated. Third generation response at LCC revealed an overall more enlightened attitude although the scores were too close for this to be the only interpretation. LCC was built to be first a liberal arts, transfer college and secondly a vocational-education college. The reverse was true of KCC. The faculty at LCC and KCC are somewhat different because of this original emphasis. This might have had something to do with the differences revealed by the questionnaire. Respondents on both campuses perceived the handicapped capable of independence and employment. LCC's perception of the educability of the handicapped, though, was greater. (See Table 7). The questions aimed at social accommodation for the handicapped were not always similarly answered on both campuses which revealed the economics of education in Hawaii - a democratic state, proud of its liberal actions toward social issues, but reserved in a time of economic austerity. (See questions on rehabilitation services, welfare supports, and social responsibility, Table 7).

Overall, the most objective statement which could be made about

the questionnaire was that it elicited interesting responses. It did not confirm the thesis of this study; it did, however, indicate it. It raised more questions which became part of the overall data of the project. Analysis of the questionnaire revealed an ambivalence of both Easterners and Westerners over the issue of segregated or integrated educational services for the handicapped and Special Education teachers as best for the handicapped. It was expected that positive scores from Westerners would be greater here. East and West, therefore, still seem to come together on wanting to separate or isolate the handicapped individual because of her/his perceived illness. The Westerner still isolates with institutions; the Easterner within the family. The handicapped legislation won't work without the enforcement and use of integrated services - especially in education.

Conclusions

From the historical/cultural information collected for this study, Easterners and Westerners have had divergent attitudinal perceptions toward handicaps, illnesses, and disabilities. The Westerner's most consistent historical/cultural response has been perceiving a disabling condition as an external challenge which could be overcome. The Easterner's most consistent historical/cultural response has been perceiving a disabling condition as an internal punishment which was coped with in this lifetime and overcome in the next. In Hawaii, generational, educational, and industrial distance have moderated this Eastern perception bringing it closer to the Western perception. There has also been East/West agreement on segregating the handicapped,

and the data from the questionnaire scores and comments revealed that the tendency of the Easterner was still to isolate within the family structure while the Westerner still isolated within a variety of institutional settings. Segregation/separation have been and remain the consistent universal problem of the handicapped individual.

Historically, Easterners have felt that a member of the family who was handicapped was the family's responsibility. Analysis of the questionnaire data revealed, though, that the more socialistic economics of Hawaii tended to bring the Easterner and Westerner together again on the social responsibility owed to the handicapped individual - for free and public access to education, political participation, cultural exchange, recreational endeavors, and a certain amount of rehabilitation. Equal and integrated acess in these social areas create a frustration over the continuation or cessation of segregated (special) education. Whether from an Eastern or Western cultural background, teachers are having difficulty perceiving the handicapped student as potentially capable of acquiring and utilizing an education to the point of life-time employment. Some social realities mitigate against the handicapped individual here because, as yet, there are not enough employed/disabled role models who work full time and do not collect social security/disability benefits.

Given these social/educational stigmata, analysis of the data revealed some ambivalent feelings, for both cultural groups again, on what degree of independence was possible for the handicapped individual. This was where the questionnaire became very frustrating for

the respondents because Jerome Stiller's hierarchy of acceptability coincided with a supposed hierarchy of who could become independent and who would remain dependent. It was very difficult for respondents to think in terms of independence for the mentally retarded or the severely paralyzed yet the law has encouraged the de-institutionalization of homes for the mentally retarded and independent living centers for cerebal palsied, paraplegics, and quadraplegics. This problem is again linked to employment for the handicapped. Many Easterners are "embarrassed for" the severely handicapped employed outside a sheltered workshop while the Westerner holds the value that one must work and receive payment for one to be a worthy human being and citizen. These two views do not necessarily conflict but one (the Eastern) tends to want to keep the handicapped individual from public view while the other (the Western) tends to create tremendous pressure on the handicapped who are seen as worthless at the same time that they are restricted by perceptions of incapacitation - the sick society who cannot work and lives off the work (benefits) of others.

Shame and guilt devolve to the handicapped individual because of these erroneous past perceptions which are still historically prevalent for both Easterners and Westerners. For Easterners, there seems to be a holdover of the problem for the family which accompanies having a handicapped child. The idea of burden was not proven out by the questionnaire equally on both campuses, but the frustrations of what to do about being a "different" person or a "different" family because of the presence of a handicapped family member was prevalent in the

written comments on the questionnaires.

Rehabilitation facilities were recognized as valuable and necessary by both Easterners and Westerners. Again, the two cultural groups came together on this question and revealed a sense or spirit of individualization at work amongst Easterners in Hawaii. Easterners are no longer absorbing-for-life their handicapped members but tending to direct into society almost, but not quite, as much as the Westerner.

Historical/cultural information was collected from all over Hawaii and the mainland. The questionnaire collected data from two Hawaiian community colleges. Analysis of the questionnaire data revealed the presence of many of the problems for the handicapped identified in the research questions. Specifically, those problems just mentioned: isolation, unavailability of employment, questions of social versus individual responsibility. There are problems then for the handicapped in these community colleges - not only the regular physical/learning problems which accompany being handicapped but the problems of attitudinal barriers based somewhat on cultural perceptions. The biggest problem still is being perceived as ill, separated already from "normal" society, not capable of a great range of growth. There are also many encouraging signs for a handicapped student attending a community college in Hawaii. As a liberal, democratic state, Hawaii will fulfill the law; the handicapped will be accommodated. The community college instructors at LCC and KCC do not object to the ethics of the law. If they can be made more aware of the first law of attitude toward disease - then they can feel encouraged about the

persons they are teaching while learning more about the conditions which afflict them and how they "feel" about those afflictions.

Observations

Two results accrued from the questionnaire which were not planned in the proposal. A revised questionnaire was recirculated at LCC. (See Appendix A). The altering of the questionnaire did not effect the overall group scores. There did, though, seem to be a shift in the response to question number seven between the regular and the revised surveys. In the revised survey there was an expected response to number seven - disagreement from the Westerner, agreement from the Easterner. The Easterner did show a tendency to think that handicapped individuals were dependent on their families. In the regular LCC survey there was more disagreement from both Westerners and Easterners with this question. (See Table 8).

TABLE 8

EAST/WEST RESPONSE TO QUESTION NUMBER SEVEN

IN REGULAR SURVEY AND REVISED SURVEY

Population	Regular Survey			Revised Survey		
	Agree	Undecided	Disagree	Agree	Undecided	Disagree
East	8/68 12%	8/68 12%	39/68 57%	7/17 41%	4/17 24%	6/17 35%
West	1/65 0%	9/65 14%	30/65 46%	4/17 24%	7/17 41%	5/17 29%

Regular questionnaire circulated to all Leeward Community College Faculty. Revised questionnaire circulated only to Voc. Ed. and Math. and Science Divisions.

The literature wherein value and attitude alterations were linked to advanced industrialization and improved economic conditions seemed to hold valid for this difference. In the revised survey, question number seven received agreement from Eastern respondents. A handicapped individual was dependent on the family. At the same time, in all surveys, a handicap was seen as an individual and family burden, but not forever dependent, (question number two). Studies which considered the change-concept within developing countries recognized the slow, steady rate of change where one value gives way while another is relatively maintained, or, paid lip service. This might be what was occuring in this instance. More to the point, though, the primary respondents to the LCC revised survey where there was a change in the perception of question number seven were vocational-technical instructors, many second generation Japanese who have had difficulty envisioning how to absorb, teach, and employ the mild to severely handicapped. Analysis of a statewide needs assessment of vocational-technical instructors done in 1979 revealed the depth of this perceived problem for these instructors.

The other unplanned for result was the "consistent-inconsistency" of response to the questionnaire at LCC and KCC. When one studied the answers to each question from the regular survey more specifically, in the light of anticipated outcome for Easterners and Westerners based on the literature, response was not always consistent on both campuses. (See Table 7).

Between the campuses, there were different anticipated responses to different questions. (See Table 7). This was probably indicative of two things: the community colleges in Hawaii are more diverse than originally supposed - each individual campus needs to assess its own specific attitudinal problems. Secondly, the questionnaires utilized in this study were not the best ones for the job. They contained weaknesses in their overgeneralization to both campuses, and in their expression and application of the Eastern concepts.

Recommendations

There were differences between the literature researched for this study - that Western and Eastern attitudinal differences toward disabilities have historically existed, and the high average scores on the questionnaire - and the unsolicited comments written on the questionnaires. Eastern/Western attitudes toward the handicapped legislation were generally favorable; attitudes toward specific handicapping conditions were less favorable. There was, therefore, either a problem with the questionnaire or, as originally assumed, a problem with the implementation process of the law which is attempting to influence the creation of new attitudes for both Easterners and Westerners while past cultural attitudes are still somewhat influential. Historians would call this problem a historical/cultural time-gap where history and historical, political, and legal occurences were running ahead of value and attitude change. This is not an unusual circumstance.

It is recommended that the theory behind this study has validity but that the approach to the development of data be altered. A better questionnaire might elicit more specific cultural responses - a questionnaire removed from the implementation of the handicapped legislation in postsecondary educational institutions. There was an attempt with this study to put together too much: cultural values, the law, specific attitudes of specific teachers. It is recommended that two accompanying studies be done to complement this project: a study determining the persistence of cultural value in America and a study of attitude perception of teachers, administrators, and staff who work with the mainstreamed handicapped. A synthesis of two separate approaches might be more relevant than this study. Analysis of this study revealed that some educators have attitudinal problems toward some handicapping conditions, and, that there is a certain amount of resistance to the handicapped legislation in postsecondary education. To better illustrate these findings, though, a questionnaire needs to ask for a broader scope of information from respondents - age, sex, etc. Bias studies can then accompany data collection in order to more specifically pinpoint problem areas.

It is also recommended that this project be utilized by administration and 504 compliance officers in the community colleges in Hawaii for discussion purposes in sensitization workshops for all school personnel. The State Department of Education could utilize this study similarly as well as the State Commission of the Handicapped and the University of Hawaii's Affiliated Facility for

services for the handicapped. The challenge from the White House Conference on Handicapped Individuals is still with us: to recognize and culturally define handicapped. This must be done in groups working together to find better ways to implement the mainstreaming laws.

In a certain sense, the implementation of this study has already begun. The Provost of LCC was aware of this study and its potential use in consciousness-raising work with the LCC faculty. His support of the study will be solicited for any communication which tells of the existence of the study and proposes its use elsewhere. Letters outlining the study and its results and offering the services of the LCC Handicapped Officer in its use are being sent to all postsecondary education administrators, University of Hawaii, State Department of Education, and the Community Colleges. (See Appendix C).

In a speech given by the researcher on the island of Kauai for the Handicapped Services Training Program of the University of Hawaii, February 8, 1980, many of the ideas of this study were shared at Kauai Community College. This endeavor led to a request to participate in the Bridge Project - an attempt to improve the physical and attitudinal accessibility of one of Hawaii's oldest historical institutions: the Bishop Museum.

This study has also seemed to have already produced some indirect effects. At LCC, in the Fall semester, a vocational program for the severely handicapped will begin where the employment and social mainstreaming of adults (ages 18-21) will be attempted.

There seems to be more interest in the investigator since information about the subject of the study has circulated. The Hawaii Museum Association has requested information on attitudinal access. The State Department of Vocational Rehabilitation has requested the advice of the investigator in the establishment of Independent Living Centers for the severely handicapped. Continued community contact such as this will be the best way to share the information gained in this study.

Despite this apparent enthusiasm and interest, however, one should not expect too much drastic attitudinal alteration too soon. Enough historical/cultural background was supplied by this study to support the need for further investigation. The handicapped also need their consciousness raised. They are not working hard enough to combat the prejudicial attitudes which they face every day. One should not be overly optimistic about the presence of the law. It is not being well or vigorously enforced. The new federal Department of Education is not operating well enough yet to give this law the governmental support it needs. The handicapped cannot expect attitude alteration within the public sphere to occur by itself. There must be a concerted, consistent effort on the part of the handicapped to make this happen. One should not be overly hopeful. There are many "personal holes" that handicapped individuals live in - families, institutions, depressed states of mind - many made by themselves, many made by others. It will take a long while for the two human communities of the handicapped and non-handicapped to come together.

REGULAR QUESTIONNAIRE

It will be greatly appreciated if you take a few minutes to respond to the following questionnaire. The statements relate to the equal educational accessibility laws for the handicapped. Please do not sign the questionnaire, but it will be helpful if you will write in your ethnic background and generation (i.e. Chinese, Japanese, etc. and 1st, 2nd or 3rd generation in Hawaii _____

Please indicate whether you are faculty, staff, administrator

_____

CIRCLE ONE OF THE FOLLOWING AS YOUR RESPONSE TO THE STATEMENTS:

Strongly Agree Agree Undecided Disagree Strongly Disagree

1. There do exist ethnic attitudinal differences toward the handicapped.

   Strongly Agree Agree Undecided Disagree Strongly Disagree

2. A handicapping condition is both a family and an individual burden.

   Strongly Agree Agree Undecided Disagree Strongly Disagree

3. Society has some responsibility for the education, employment, and medical care of the handicapped.

   Strongly Agree Agree Undecided Disagree Strongly Disagree

4. Only Special Education teachers are equipped to teach the handicapped.

   Strongly Agree Agree Undecided Disagree Strongly Disagree

5. Integrated social and educational settings are best for the handicapped.

   Strongly Agree Agree Undecided Disagree Strongly Disagree

6. The handicapped can become independent.

   Strongly Agree Agree Undecided Disagree Strongly Disagree

7. A handicapped individual will always be dependent on her/his family.

   Strongly Agree Agree Undecided Disagree Strongly Disagree

8. Special, segregated education is best for the handicapped.

   Strongly Agree Agree Undecided Disagree Strongly Disagree

9. The handicapped can attain full employment.

   Strongly Agree Agree Undecided Disagree Strongly Disagree

10. Society has no responsibility for the handicapped.

    Strongly Agree Agree Undecided Disagree Strongly Disagree

11. A handicap is an accident of nature.

    Strongly Agree Agree Undecided Disagree Strongly Disagree

12. Medical and rehabilitation facilities will always be needed and utilized by the handicapped and their families.

    Strongly Agree Agree Undecided Disagree Strongly Disagree

13. The handicapped will always have to rely on Welfare and disability supports.

    Strongly Agree Agree Undecided Disagree Strongly Disagree

14. Any willing teacher can teach the handicapped.

    Strongly Agree Agree Undecided Disagree Strongly Disagree

15. A handicap is no one's fault.

    Strongly Agree Agree Undecided Disagree Strongly Disagree

PLEASE RETURN COMPLETED QUESTIONNAIRE TO YOUR DIVISION OR DEPARTMENT SECRETARY. THANK YOU.

QUESTIONNAIRE GRADING KEY

1. 54321
2. 12345
3. 54321
4. 12345
5. 54321
6. 54321
7. 12345
8. 12345
9. 54321
10. 12345
11. 54321
12. 54321
13. 12345
14. 54321
15. 54321

Highest Score = 75

The Revised Questionnaire circulated only at Leeward Community College changed the wording in questions numbers 3, 7, 12, and 13 as follows:

3. Society has responsibility for the education, employment, and medical care of the handicapped.

7. A handicapped individual is dependent on her/his family.

12. Medical and rehabilitation facilities are needed and utilized by the handicapped and their families.

13. The handicapped rely on Welfare and disability supports.

UNSOLICITED COMMENTS WRITTEN ON THE QUESTIONNAIRES BY THE RESPONDENTS

Seventy-four of the returned questionnaires had statements written on them. The statements varied from complaints of the non-specificity of the 'handicapped' to general questions on the purpose of the questionnaire. The majority of complaints expressed frustration with the generality of the questionnaire.

Forty-two respondents stated that their answers depended on either the type, severity, condition, degree, extent, kind or nature of the handicap.

Following are selected statements:

"Teaching the handicapped is a faculty burden. Assistance to the handicapped should be voluntary."

"Your survey asks a lot of questions that must really be looked at handicap by handicap (case by case). Very hard to make a single statement to cover all situations.

"The nature of the handicap may suggest special consideration."

"You lump too many conditions under one heading, are you talking about severe, mild, mental, etc., etc.?"

"The handicapped is not a minority, it is a number of minorities."

"Many of these statements are too general to cover the handicapped I know and have worked with."

"Handicaps are present in too many degrees to be generalized in this manner. Please indicate severe, moderate, mild, etc."

"You need to define handicap a little more. I reviewed my responses and they seem contradictory."

Other Questionnaire statements:

"In what sense can the handicapped become independent?"

"Can you define independent?"

On question number two, the word 'burden' was scratched out by one second generation Japanese and replaced with 'responsibility'. Two Westerners replaced the word 'burden' with 'opportunity' and 'challenge'. One Italian Catholic replaced the word 'burden' with 'blessing'.

Most ironic comment:

"I think statements like these force stereotyping of responses."

80/81

DISSEMINATION LETTER

Dear Provost _____

This letter is intended to be a follow-up of information already sent to you regarding my doctorate Major Applied Research Project (MARP) for NOVA University. I have completed my study on East/West Attitudes Toward the Handicapped and Their Presence in Postsecondary Education in Hawaii, and would like the opportunity to share some of the information I found with your campus. The type of meeting or seminar and arrangements with my Provost to have such an information-sharing session, I would be glad to work our with you.

Although the study did not prove to be significantly conclusive on determining the present attitude of postsecondary teachers in Hawaii toward their handicapped students, it does provide significant historical and cultural material on East/West perceptions of handicapping conditions to be useful in consciousness-raising and informational workshops.

Please let me know how I can assist you in the use of this material.

Sincerely,

Kirk MacGugan
Instructor
LCC Handicapped Officer

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